## PATENT APPLICATION

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of

Annie ANDRIEUX et al.

Group Art Unit: 1614

Application No.: 10/586,486

Filed: December 12, 2006

Docket No.: 128765

USE OF EPOTHILONES IN THE TREATMENT OF NEURONAL CONNECTIVITY

DEFECTS SUCH AS SCHIZOPHRENIA AND AUTISM

## **INFORMATION DISCLOSURE STATEMENT**

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

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Pursuant to 37 CFR §1.56, the attention of the Patent and Trademark Office is hereby directed to the reference(s) listed on the attached PTO-1449. Unless otherwise indicated herein, one copy of each reference is attached. It is respectfully requested that the information be expressly considered during the prosecution of this application, and that the reference(s) be made of record therein and appear among the "References Cited" on any patent to issue therefrom.

This Information Disclosure Statement is being filed (a) within three months of  $\boxtimes$ the U.S. filing date of this non-CPA application, OR (b) before the mailing date of a first Office Action on the merits in the present application. No certification or fee is required.

Respectfully submitted,

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Date: June 14, 2007

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DEPOSIT ACCOUNT USE **AUTHORIZATION** Please grant any extension necessary for entry; Charge any fee due to our Deposit Account No. 15-0461

Sheet 1 of 1	
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Form PTO-1449 (REV. 1/06)		US Dept. of Cor PATENT & TRADEMARK C	nmerce OFFICE	ATTY D 128765	TY DOCKET NO. 8765		APPLICATION NO. 10/586,486			
INFORMATION DISCLOSURE STATEMENT										
(Use several sheets if necessary)			APPLICANT(S) Annie ANDRIEUX et al.							
			FILING DATE December 12, 2006			GROUP 1614				
U.S. PATENT DOCUMENTS										
Examiner Initials	Cite No.	Document Number	Da	ite		Name				
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FOREIGN PATENT DOCUMENTS										
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			OTHER I	осиме	NTS					
Examiner Initials	Cite No.	(Including Aut	thor, Title,	Date, Pert	inent Pages, etc.)					
	N. C. Andreasen, "Scale for the Assessment of Negative Symptoms (SANS)", Department of Psychiatry, University of Iowa College of Medicine, Iowa City, Iowa (1983) pp. 1-19.									
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EXAMINER	*					DATE	CONSIDERED	)		
Examiner: Initial if citation considered, whether or not citation is in conformance with M.P.E.P. 609; draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.										

Date: June 14, 2007